ARTICLE 2

SECTION 1

CONFIDENTIALITY

1. GENERAL

Health and Human Services Agency (HHSA) employees are encouraged to respond to inquiries by providing information regarding HHSA policies and procedures. Care must be taken, however, to preserve the confidentiality of HHSA records, including those stored electronically.

This chapter provides staff with policies and procedures regarding the confidentiality of HHSA Medi-Cal records and the release of information to qualified agencies, persons and Medi-Cal providers. State Department of Health Services (SDHS) Manual of Policies and Procedures (MPP), Divisions 19-000 address confidentiality. Staff are advised to review this section and the following material prior to releasing confidential information to other agencies or individuals. Both the release and possession of confidential information in violation of MPP regulations can be prosecuted as a misdemeanor.

2. <u>CONFIDENTIAL INFORMATION</u>

Names, addresses, and all other eligibility information concerning the circumstances of any particular applicant/beneficiary, including whether that person is or is not an applicant or recipient, will not be disclosed for any purposes not directly related to the administration of public social services programs.

To protect the confidentiality of an individual public assistance applicant or recipient, the individual must be afforded the opportunity to provide needed information or verifications in a manner which does not identify the individual as a public assistance applicant or recipient. Before a collateral contact is initiated, the applicant/beneficiary must be informed of his/her option to obtain the needed information himself/herself without any requirement to use county forms or form letters. Except for SDHS/Public Assistance Fraud Division (PAFD) staff, the applicant/beneficiary's written consent must be obtained prior to initiating collateral contacts.

Unauthorized disclosure of confidential information by a County employee is a misdemeanor and may lead to criminal or civil liability for both County employees and the County. The County may also take disciplinary action against the employee.

Case records are the original and permanent records of HHSA and are maintained for reference and audit purposes to document eligibility. As a general policy, case records and original documents should be either at the assigned Family Resource Center (FRC) or in Records Library. All information in case records shall be considered confidential and shall be safeguarded.

Unless approved by an Assistant Deputy Director of the Income Maintenance Bureau, no case record will be removed from HHSA. When requested, case records may be routed to other divisions or administrative staff for official use (i.e., PAFD, State Medi-Cal Investigators, OSU, Appeals, Quality Control, Fiscal, Internal Security, etc.).

State and Federal Quality Control may borrow HHSA cases for their Quality Control reviews without approval of Program and Policy Development. The requests for cases may be made directly to the FRC or through the Quality Control Section Chief. Separate procedures apply to subpoenaed records or criminal acts committed in a HHSA office (see section 4.C.5).

The purpose of this policy is to protect the agency's records while providing <u>authorized persons</u> access to information. These policies and procedures do not apply to adoption case records as information may not be released from adoption case records.

3. RELEASE OF INFORMATION

This section shall not prohibit the release of information to other public agencies to the extent required for verifying eligibility. The worker will record in the case narrative all requests for information and the disposition of the request.

A. Applicant/Beneficiary Consent Not Required

Confidential information may only be released without the consent of the applicant/beneficiary for purposes directly connected with the administration of public social services programs, except as specified in Section 4.C.5, Law Enforcement Officials.

1) Authorized Disclosure List

In addition to HHSA staff of this county and their counterparts in other counties or states, the following agencies and/or persons are authorized to receive or exchange confidential information. This list is not intended to be complete and/or result in the automatic disclosure of information to persons or agencies on the list. The list will provide a quick reference of persons and agencies most frequently making authorized inquiries.

- a) Auditor and Controller (County, State and Federal)
- b) County Counsel (except for investigations of Worker's Compensation claims or other questionable situations) *
- c) Department of Health and Human Services (State, County, Federal)
- d) Department of Health Services (State, Federal)
- e) District Attorney PAFD, FSD, Welfare Employee Fraud Prosecutions, Child Support Prosecutions only

- f) Employment Development Department
- g) Social Security Administration
- h) Mental Health Services
- VOLAGS and Central Intake Unit
- j) Juvenile Probation Department for billings on AFDC Foster Care cases
- k) Grand Jury
- Revenue and Recovery
- m) Housing Authorities
- * If in doubt as to the propriety of releasing any program specific information, contact Program and Policy Development Division.

2) Public Administrator

In San Diego County, the Public Administrator is the Indigent Burial Officer and operates the Indigent Burial Program as an agent of HHSA. Information from Medi-Cal records may be released to the Public Administrator when the information is needed for the operation of the Indigent Burial Program.

Medi-Cal Providers

Limited beneficiary eligibility information will be supplied to Medi-Cal providers under certain circumstances. If the eligibility information is within the last twelve months, encourage the provider to use the POS system to verify Medi-Cal eligibility. If the information is for a period over one year from the date of the request, see Article 14, Section 3.

- a) County ID number,
- b) Date of birth,
- c) Other health coverage,
- d) Any restricted status,
- e) Medicare coverage, and
- f) Eligibility status for month(s) requested including eligible, ineligible, share of cost amount, and LTC status.

Note: The worker may not release information concerning an ineligible individual other than the fact that he/she is not eligible for Medi-Cal for a specific month.

4) Medi-Cal Provider Consultants

Medi-Cal Provider Consultants are people licensed by the State, who may act as the agent of a Medi-Cal provider (including hospitals) for certain authorized activities. The information that can be provided is the same as for a hospital. See 3) above.

If a Medi-Cal provider consultant assists a patient with the application process or appeals process, the Medi-Cal provider consultant is acting as a representative of the applicant/beneficiary, not as an agent of the Medi-Cal provider. In this role, the Medi-Cal provider consultant would need written authorization from the applicant/beneficiary to receive case information from HHSA.

5) Research

Before gaining access to case records, research organizations or graduate students conducting research for a thesis or term paper must have prior approval from an Assistant Deputy Director from the Income Maintenance Bureau. Training and Development has responsibility for submitting research proposals to the Assistant Deputy Director.

B. Applicant/Beneficiary Consent Required

- Information contained in applications or other documents made or kept by HHSA may be released to the applicant/beneficiary or their authorized representative subject to the following conditions:
 - a) The applicant/beneficiary has authorized the release of the information, and
 - b) The information was provided solely by the applicant/beneficiary, or
 - c) The applicant/beneficiary authorized HHSA to obtain the information (bank verifications, CSV verifications, income verifications, etc.).

Except as provided in section (3) below, all authorizations are to be written.

Written authorization to release confidential information must be signed and dated by the applicant/beneficiary, and must be received by the worker prior to release of the information. The authorization shall expire one year from the date signed unless expressly limited to a shorter period. The applicant/beneficiary may revoke the authorization at any time.

To use the authorization, the representative must first be positively identified.

 Telephone authorization may be accepted in lieu of written authorization where the circumstances ensure that the applicant/beneficiary has positively identified himself/herself to the County. Acceptable items of identification may include case number, driver's license number, social security number, or date of birth.

A telephone authorization is a temporary, one time only authorization and is good for only one phone call. The telephone authorization should be followed by a written authorization. The applicant/beneficiary's verbal agreement to provide a written authorization must be documented in the case narrative along with the date that the release of information form is sent to the applicant/beneficiary.

Note: Workers are not to release medical (health) information from a case, based on an applicant/beneficiary's verbal authorization. Written authorization from the applicant/beneficiary is always required prior to releasing medical information to a third party. See 8-A-1 below regarding additional requirements to release medical information from a case file.

- 4) Authorization taken by designated agencies. The following agency routinely obtains an applicant/beneficiary's authorization to request information pertaining to the case. When this agency requests HHSA case information, the worker will: positively identify the agency representative; ask if a release of authorization is in the agency file; and narrate in the HHSA case, the contact's name and that a release is on file with the agency.
 - **New Beginnings Family Service Advocates** routinely obtain an authorization from the Medi-Cal applicant/beneficiary to request information from the Medi-Cal case file when they begin working with a family.

4. REQUEST FOR INFORMATION

Procedures for handling requests for information from specific groups and individuals will be handled as follows:

A. Questionable/Unreasonable Requests:

When a request for information does not appear to be reasonably related to the responsibilities of the requesting office, a written statement concerning the request and the circumstances must be forwarded to the FRC Manager for review and approval/disapproval of the request. If necessary, the FRC Manager will forward the request to the Assistant Deputy Director for further review and approval/disapproval.

B. Closed Cases

Inquiries from agencies and persons listed in section 3.A.1 on cases that have been closed <u>and forwarded to Record Library</u> are to be referred to the Public Assistance Inquiry Unit.

C. Active Cases/Closed Cases in FRC

Inquiries from agencies and persons not listed in section 3.A.1 will be handled as follows:

1) Board of Supervisors and Other Political Entities

All inquiries from the Board of Supervisors or other political entities are to be referred to the FRC Manager or the Assistant FRC Manager for resolution. These inquires may include:

- a) General requests for information on program or FRC procedures; or
- b) Requests based on complaints by an applicant/beneficiary pertaining to HHSA handling of his/her case; or
- Requests based on any anonymous complaint pertaining to case handling or to a particular applicant/beneficiary.

The manager will respond to the inquiry or attempt to resolve the issue without releasing information concerning a specific applicant/beneficiary. Usually, these inquires can be handled by the manager by providing general program information or information about FRC procedures.

If the individual making the inquiry requests information about a specific applicant/beneficiary or the results of follow-up action with an applicant/beneficiary, the applicant/beneficiary's consent (verbal or written) is required prior to the release of information. If the issue or result cannot be resolved, the FRC Manager or Assistant Manager will contact the Assistant Deputy Director for additional clarification and direction needed to respond to the inquiry.

2) Absent Parents, Applicant/Beneficiary's Family or Friends

Release of information to absent parents, the applicant/beneficiary's family or friends requires the written consent of the applicant/beneficiary. In handling such requests, the following procedure must be followed:

- a) The worker will <u>not</u> acknowledge to the requesting person that the applicant/beneficiary or the applicant/beneficiary's child(ren) have applied for or are receiving aid or services.
- b) The worker will advise the requesting person that he/she must submit a written request for any information including his/her address and phone number.
- c) When the worker receives the written request, he/she will notify the applicant/beneficiary of the request for information. The applicant/beneficiary may then provide the information directly to the requesting person.
- d) If the applicant/beneficiary does not wish to provide the information directly, but will provide written authorization to release the information, the worker will provide the information to the requesting person. The written authorization must be received first and the requesting person must provide proof of identity before the worker provides the information.

- e) Should the applicant/beneficiary refuse consent, the information will <u>not</u> be released. The requesting person may then, as appropriate, contact the DA or a private attorney and use legal recourse.
- f) If an absent parent alleges that the aided parent has <u>kidnapped</u>, <u>abused</u>, or <u>neglected the child(ren)</u>, the case must be referred to Child Protective Services for appropriate action. The worker must report the allegation to the Child Abuse Hotline (560-2191). The worker should also provide the absent parent with the hotline number for future use.

3) <u>Defense Attorneys</u>

The worker will refer requests from Defense Attorneys, including Legal Aid Society and the Public Defender, which do not include an applicant/beneficiary authorized release to the Policy and Program Support Division (PPSD) for an explanation of how to subpoena records.

4) Businesses

Release of information to businesses is only authorized when HHSA has a written and dated authorization from the applicant/beneficiary. Valid business inquiries may include grant and address information to establish an applicant/beneficiary's credit but do <u>not</u> include inquiries to pursue collection on a delinquent account.

5) Law Enforcement Officials (See Appendix B-1)

Confidential information about an applicant/beneficiary may be released to a state or local law enforcement agency <u>only</u> in the course of investigations, prosecutions, civil/criminal <u>proceedings directly related to the administration of the Medi-Cal Program</u>.

All types of information, written or oral, shall be confidential and shall not be open to examination other than for purposes directly connected with the administration of the Medi-Cal Program, such as conducting or assisting an investigation, prosecution or civil or criminal proceeding related to the administration of the Medi-Cal Program. The non-disclosure policy applies to all requests for information, including those from other government agencies, the courts (unless ordered by the court to do otherwise), and the enforcement officials.

Disclosure of information from the Medi-Cal case records of deceased applicants/beneficiaries is strictly prohibited.

Disclosure of information from the Medi-Cal case records of applicants/ beneficiaries with outstanding felony and/or misdemeanor arrest warrants is strictly prohibited.

6) Private Organizations/Persons

Private organizations and individuals not on the authorized disclosure list who request information, including whether or not a person is receiving or has received aid, must be informed about the regulations regarding confidentiality of case records. Often general statistical or specific program information can resolve the inquiry. All unauthorized inquiries should be evaluated for referral to other agencies or offices. Media inquiries are to be referred directly to the FRC Manager, who, when necessary, will refer the media to the Central Media Coordinator.

5. APPLICANT/BENEFICIARY REQUEST FOR INFORMATION

- A. Information relating to eligibility that has been provided solely by the applicant/beneficiary or authorized by the applicant/beneficiary (bank verification requests, medical releases, CSV verification requests, etc.) and is contained in applications or other documents made or kept by HHSA may be released to the applicant/beneficiary or the applicant/beneficiary's authorized representative.
- B. Information provided confidentially to the HHSA by a third party and <u>not</u> provided solely by the applicant/beneficiary will <u>not</u> be disclosed to the applicant/beneficiary or his/her authorized representative. Such information includes PAFD/DHS Reports, informant identity and other privileged communication.
- C. Case information obtained through the Income Eligibility Verification System (IEVS) requires special handling to protect the confidentiality of IEVS information which may have been mismatched to the applicant/beneficiary.
 - If the IEVS reports verify information previously reported by the applicant/ beneficiary, the reports will be treated as verifications authorized by the applicant/beneficiary and may be released to the applicant/beneficiary.
 - 2) If the IEVS reports do not appear to pertain to the applicant/beneficiary or if they contain previously unreported information, they will be treated as information provided confidentially by a third party and they may not be released until the discrepancy has been clarified and the accuracy confirmed.
 - 3) Sufficient information from the reports may be provided to the applicant/beneficiary to allow the applicant/beneficiary to obtain additional verification and/or clarification.

EXAMPLE: EDD reports a match of SSN to a UIB recipient. The name does not match and the applicant/beneficiary claims no UIB income. The EDD Field Office number from the report may be provided to the applicant/beneficiary to aid EDD in clarifying the discrepancy. The name of the UIB recipient may not be released.

Specific items in the case record may be photocopied by eligibility staff, on request, for the applicant/beneficiary and/or his/her authorized representative. Photocopies in response to general requests (the case file, <u>all</u> status reports, etc.) should not be provided. Photocopies of case narratives will <u>not</u> be provided.

6. OTHER REQUESTS

Confidentiality questions or requests for release of information not specifically addressed in this chapter should be referred to the Assistant FRC Manager or the FRC Manager for review. Unauthorized disclosure of confidential information may render the County and/or staff liable for criminal and civil suits.

7. INSPECTION OF CASE RECORDS

A. Procedure

Authorized persons requesting review, as well as those authorized to actually make the inspection, must agree to the FRC review procedures listed below before being allowed access to the case record.

Authorized persons requesting review in preparation for a State Hearing will be subject to these FRC review procedures. If a more extensive review is requested, the applicant/beneficiary should be referred to the Appeals section to schedule an appointment.

FRC review procedures are as follows:

 The complete case record will be made available for inspection, except for privileged communications as noted in 8 below and information not provided solely by or authorized by the applicant/beneficiary. Such information must be removed from the case record before any review by the applicant/beneficiary or his/her authorized representative.

Since case narratives may make reference to privileged information or information provided by third parties, and are the work product of the worker (not provided solely by the applicant/beneficiary), they must be removed from the case prior to its inspection.

- 2) Case inspection will be permitted only during normal working hours.
- FRCs will make a private room available for record review where reviewers may discuss case contents.

No case will be made available unless the worker or a suitable substitute is present in the room <u>during the entire period of examination</u>.

4) The reviewers will <u>not</u> be permitted to remove, alter, photocopy or photograph anything in the case record. Reviewers will be permitted to make notes on what they see in the case record.

On request, specific items in the case record may be photocopied by eligibility staff for the reviewer. Photocopies in response to general requests (the case file, <u>all</u> status reports, etc.) should not be provided. Program Guides or other regulations may be made available, on request, for the case review. Photocopies of applicable regulations may be made; however, entire chapters are not to be photocopied.

- 5) Requests to review a closed case in Record Library should be directed to the Public Assistance Information Unit.
- 6) The worker will record in the case narrative all requests for inspection of case records.

8. INFORMATION WHICH MAY NOT BE RELEASED TO THE APPLICANT/BENEFICIARY

A. <u>Privileged Communications</u>

There are communications contained in case records that are not subject to review by the applicant/beneficiary or his/her authorized representative. Additionally, there are communications that are not subject to review by an applicant/beneficiary authorized representative without <u>specific</u> written consent of the applicant/beneficiary.

Some of these privileged communications are briefly summarized below:

1) Physician/Patient (Medical Personnel/Patient)

Confidential communication from a physician cannot be disclosed to the authorized representative without <u>specific</u> written consent of the patient. Some physicians may request a report not be released to the patient. In such cases, the physician's consent to release the report must be obtained.

2) SDHS Investigation/PAFD Reports

All reports, summaries and other confidential communications/ information obtained by DHS Investigations/PAFD in the process of investigating an alleged fraud will be removed from the case record prior to its inspection by an applicant/beneficiary or an authorized representative.

3) <u>Identity of Informer</u>

Workers will not disclose the identity of an informer to the applicant/beneficiary or his/her authorized representative. Questions in this regard should be referred to DHS investigators.

4) Lawyer/Applicant/Beneficiary

Matters of confidential communication between a lawyer and applicant/beneficiary cannot be disclosed without <u>specific</u> written consent of the applicant/beneficiary.

5) Husband/Wife

Confidential communication between husband and wife during their marital relationship cannot be disclosed unless both agree to its disclosure, even if the marriage has terminated.

9. COURT APPEARANCES - SUBPOENAS

A. <u>General Information</u>

A <u>subpoena</u> is a court process to compel a person to appear at a deposition or court proceeding to testify as a witness. A <u>subpoena duces tecum</u> is a court process to compel a person to appear as a witness and to compel that witness to produce all documents or records named in the subpoena.

The testimony of employees involving case records for matters not directly related to the administration of public social service programs is an inappropriate use of case records and a violation of confidentiality. To avoid violating confidentiality and/or court orders, the following procedures will apply. These procedures apply only to subpoenas involving HHSA records and applicants/beneficiaries.

B. <u>District Attorney/County Counsel Subpoena</u>

HHSA staff are routinely served with subpoenas issued by the District Attorney's Office. It is HHSA policy to fully cooperate with the DA in the investigation or prosecution of all matters directly related to the administration of public social services. Procedures for staff served with a subpoena <u>issued by the District Attorney</u> are outlined below:

- 1) A demand for witness fees and mileage should <u>not</u> be made.
- 2) The employee will notify his/her supervisor or FRC Assistant Manager.
- 3) The employee named on the subpoena is expected to appear as directed. When the employee is no longer assigned to IMB, the supervisor or ADM will immediately contact the Deputy DA identified on the subpoena to provide the identity of the employee who will respond as a substitute. If there has been a change in the worker assigned to the case, the Deputy DA should be informed so that he/she may make the decision on who will be required to appear.
- 4) The employee will contact the Deputy DA to discuss the case and restrictions to availability for court (planned vacation or medical leave).
- If unsure whether the subpoena relates to a matter directly connected to HHSA programs, the employee's supervisor or Assistant FRC Manager must contact the Subpoena liaison at PPSD.
- 6) If the subpoena relates to a matter not directly related to the administration of public social service programs, the employee will follow the procedures outlined below for Private Attorney Subpoenas.

C. Private Attornev Subpoena

HHSA staff are occasionally served with subpoenas or subpoenas duces tecum initiated by private attorneys, Legal Aid Society or the Public Defender. These subpoenas normally request the presence of staff and/or case records and may deal with civil or criminal matters not directly related to the official administration of a public assistance program, such as divorce, child support, child custody, or property settlement matters.

Frequently these subpoenas will be for the case record, rather than a specific person, and are addressed to the "Custodian of Record." FRC staff are not to accept service of subpoenas addressed to the Custodian of Record. The server of the subpoena must be informed that the Custodian of Record for HHAS is the Deputy Director, and that service of the subpoena may be arranged by the server contacting the Income Maintenance Bureau Subpoena Liaison at PPSD.

By State Law (W & I 10850), the testimony of staff and/or use of case records for matters not related to administration of public assistance programs is considered inappropriate use of public welfare records and a violation of confidentiality. All HHSA staff served with a <u>subpoena</u> or <u>subpoena</u> duces tecum from a private attorney must adhere to the following procedures:

- Witness fees and mileage reimbursement amounts are established by State Law. The employee must demand witness fees and mileage at the time the subpoena is served. The employee must also demand that HHSA receive the fees and mileage prior to the court appearance date. The person delivering the subpoena may write a check and present it at the time the subpoena is served. In such cases, the employee must send the check with the subpoena to the Subpoena liaison, PPSD at Mail Stop W401.
- 2) Immediately following the serving of the subpoena, the employee's immediate supervisor will call the Subpoena liaison etc., who will determine if the pending legal proceedings are related to the administration of a public social services program.
- 3) Upon notification, the Subpoena liaison will request that the subpoena and check for witness fees, if applicable, be delivered to him/her as soon as administratively possible, preferably on the same day.
- 4) Upon receipt of the subpoena, the Subpoena liaison will contact the serving attorney and explain the legal provisions of confidentiality (W & I Code 10850) and request that the subpoena be withdrawn.
- If the attorney agrees to withdraw the subpoena, the Subpoena liaison will notify the employee's supervisor that the employee is excused from compliance with the subpoena.

6) If the attorney refuses to withdraw the subpoena, the Subpoena liaison will return the subpoena to the employee and provide him/her with a copy of a "Points and Authorities in Opposition to Subpoena Duces Tecum." The "Points and Authorities" is a statement prepared by the County Counsel's Office, and serves as a formal request to the court to excuse the witness and/or records on the grounds that the records are confidential. The employee must appear in court at the designated time.

The employee must not testify or allow anyone to see the record until the "Points and Authorities" has been presented to the judge and the judge has made a determination. The "Points and Authorities" should be given to the judge at the time the employee is called to the stand to testify. If the judge rules against the "Points and Authorities," the employee must comply with the decision, submit the case record and give requested testimony. If parts of the record are introduced as evidence, the employee shall seek court approval, on the record, of substitution of photocopies so that the case record and its documents can remain intact when the employee is excused.

10. AIDS TEST RESULTS

Any person who willfully or negligently discloses AIDS test results to a third party without written permission from the applicant/beneficiary is guilty of a misdemeanor punishable by imprisonment in the county jail for up to one year or a fine up to \$10,000.

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Disclosure of Confidential Information/Records

Authorization for Release Not Required	Authorization for Release on File with Agency	Client Authorization Required
CSB and AESB		Attorneys with subpoenas (refer to PPDD)
DSS staff in other counties and states	New Beginnings Family Service Advocates	Banks
Department of Health Services, State and County		Church organizations
Auditor and Controller		Landlords
		Law enforcement agencies: FBI, INS, state/local agencies, other official agencies**
		Legal Aid
City Housing Commission*		Legislature
County Counsel (except for investigations of Workman's Compensation claims)		Media (refer to District Manager)
County Housing Authority*		Private Attorneys
District Attorney-PAFD, FSD, welfare/employee fraud prosecutions, child support prosecutions and child abduction investigations/prosecutions		Private Organizations
Employment Development Department		Relatives not in the case
Grand Jury		Welfare Rights Organization
Juvenile ProbationFoster Care cases		Board of Supervisors (with CAO approval only)
Medi-Cal Providers-medical coverage: County ID#, other health coverage, restricted status, DOB, active months		
Public AdministratorIndigent Burial Program		
Revenue and Recovery		
Social Security Administration		
VOLAGS and Central Intake Unit		

^{*} Advance notice to client required, via form 16-54 DSS. ** Exceptions and conditions included in MPG 2-1-4.C-5

MPG Letter #294

Confidentiality Provisions for Disclosure of Information/Records to Law Enforcement Agencies by Program

Program	Disclosure of Information/Records to Law Enforcement Agencies		
AFDC Food Stamps	 Investigation of criminal act committed in a welfare office or against a welfare worker, or witnessed by a welfare worker, while involved in the administration of public social services: may release applicant's/recipient's name, physical description and address. (WIC §10850) 		
Foster Care (excluding AAP)	 Investigation of a criminal act intentionally committed against a known off-duty welfare worker in retaliation for an act performed in the course of the worker's duty: may release applicant/recipient's name, physical description and address. (WIC §10850) 		
Refugee	Felony and/or misdemeanor warrant: may release applicant's/recipient's name, address, telephone number, birthdate, social security number, and physical description. (WIC §10850.3)		
Reference: Privacy Act of 1974, Food Stamps Act of 1977,	NOTE: Request for information must be made by the head of the law enforcement agency or his/her designee in writing. Request must be specific to the applicant/recipient for whom arrest warrant has been issued. Applicants/recipients must be notified at application and renewal that confidential information may be released to law enforcement agencies without authorization when a felony and/or misdemeanor arrest warrant has been issued.		
45 CFR 5b.9 7 CFR 272.2 WIC §10850 et al MPP Division 19 FSM 63-200	Applicant or recipient is deceased: may release name, address, telephone number, birthdate, social security number and physical description, upon receipt of a written request from head of law enforcement agency or his/her designee, and agency is otherwise unable to identify the deceased. Information may be released by phone, with written request submitted within five days of release. (WIC §10850.7) This information cannot be released from Food Stamp case records.		
	 None of these sections is to be construed to authorize the release of a general list identifying individuals applying for or receiving public social services. 		
Medi-Cal	May provide information to law enforcement only in the course of investigations, prosecutions, civil/criminal proceedings directly related to the administration of the Medi-Cal Program.		
Reference: Social Security Act Title XIX, 42 USC 1396a, 42 CFR 431.300 WIC §14100.2	All types of information, written or oral, shall be confidential and shall not be open to examination other than for purposes directly connected with the administration of the Medi-Cal Program, such as conducting or assisting an investigation, prosecution or civil or criminal proceeding related to the administration of the Medi-Cal Program. The non-disclosure policy applies to all requests for information, including those from other government agencies, the courts (unless ordered by the court to do otherwise), and the law enforcement officials.		
MEM Article 2-H			